

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

Chapter you are filing under:

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Lee

First name

R

Middle name

Bring your picture identification to your meeting with the trustee.

Weil, II

Last name and Suffix (Sr., Jr., II, III)

Jacqueline

First name

S

Middle name

Weil

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Lee Roy Weil, II**Lee Weil****Lee R Weil**

Jacqueline Sue Weil
Jacqueline Sue Wright
Jacqueline Sue Fisher
Jackie Weil
Jacqueline Weil

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx-xx-2097****xxx-xx-5275**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

☒ I have not used any business name or EINs.

☒ I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

Business name(s)

EINs

EINs

5. Where you live

**217 Deer Lane
 Lynnvile, IN 47619**

Number, Street, City, State & ZIP Code

Warrick

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
 Explain. (See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
 Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
☐ Yes.
- | | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No
☐ Yes.
- | | |
|-----------------------------|---------------------------|
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
-
11. **Do you rent your residence?** ☒ No. Go to line 12.
☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

 Name of business, if any

 Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No.

☐ Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property? _____

 Number, Street, City, State & Zip Code

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

| | | |
|--|------|---|
| 16. What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17. |
| | 16b. | Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17. |
| | 16c. | State the type of debts you owe that are not consumer debts or business debts |

| | | |
|--|--|--|
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. | I am not filing under Chapter 7. Go to line 18. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|--|--|--|

| | | | |
|---|--|--|---|
| 18. How many Creditors do you estimate that you owe? | <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000 |
|---|--|--|---|

| | | | |
|--|---|--|--|
| 19. How much do you estimate your assets to be worth? | <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
|--|---|--|--|

| | | | |
|---|---|--|--|
| 20. How much do you estimate your liabilities to be? | <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
|---|---|--|--|

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Lee R Weil, II**Lee R Weil, II**

Signature of Debtor 1

/s/ Jacqueline S Weil**Jacqueline S Weil**

Signature of Debtor 2

Executed on **June 23, 2016**

MM / DD / YYYY

Executed on **June 23, 2016**

MM / DD / YYYY

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kevin Kinkade

Signature of Attorney for Debtor

Date

June 23, 2016

MM / DD / YYYY

Kevin Kinkade

Printed name

Kinkade & Associates, P.C.

Firm name

123 NW 4th Street

Suite 201

Evansville, IN 47708-1709

Number, Street, City, State & ZIP Code

Contact phone **812-434-4909**

Email address

kinkadeassociates@hotmail.com

17733-82

Bar number & State

Fill in this information to identify your case:

| | | | |
|---|------------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Jacqueline S Weil | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | SOUTHERN DISTRICT OF INDIANA | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

| | | Your assets Value of what you own |
|---|----|--------------------------------------|
| 1. Schedule A/B: Property (Official Form 106A/B) | | |
| 1a. Copy line 55, Total real estate, from Schedule A/B..... | \$ | 162,600.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B..... | \$ | 32,849.57 |
| 1c. Copy line 63, Total of all property on Schedule A/B..... | \$ | 195,449.57 |

Part 2: Summarize Your Liabilities

| | | Your liabilities Amount you owe |
|---|----|------------------------------------|
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | | |
| 2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ... | \$ | 151,624.82 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | | |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$ | 0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | \$ | 64,636.67 |
| Your total liabilities | | \$ 216,261.49 |

Part 3: Summarize Your Income and Expenses

| | | |
|---|----|-----------------|
| 4. Schedule I: Your Income (Official Form 106I) | | |
| Copy your combined monthly income from line 12 of <i>Schedule I</i> | \$ | 2,929.20 |
| 5. Schedule J: Your Expenses (Official Form 106J) | | |
| Copy your monthly expenses from line 22c of <i>Schedule J</i> | \$ | 2,927.22 |

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes

7. What kind of debt do you have?

☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 3,726.50

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

| | Total claim |
|--|-----------------|
| From Part 4 on Schedule E/F, copy the following: | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ <u>0.00</u> |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ <u>0.00</u> |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ <u>0.00</u> |
| 9d. Student loans. (Copy line 6f.) | \$ <u>0.00</u> |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ <u>0.00</u> |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ <u>0.00</u> |
| 9g. Total. Add lines 9a through 9f. | \$ <u>0.00</u> |

Fill in this information to identify your case and this filing:

| | | | |
|---|--------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Jacqueline S Weil | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: <u>SOUTHERN DISTRICT OF INDIANA</u> | | | |
| Case number _____ | | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

☐ No. Go to Part 2.

☒ Yes. Where is the property?

1.1

3129 Arlington Ave

Street address, if available, or other description

Evansville IN 47712-0000

City State ZIP Code

Vanderburgh

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$88,000.00

Current value of the portion you own?

\$88,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Joint tenants with full rights of survivorship- Value based on 2016 Tax Assessment

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

The house is set for Sheriff Sale on 07/28/2016. The debtors have moved out of the property.

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

If you own or have more than one, list here:

1.2

217 Deer Lane

Street address, if available, or other description

Lynnville IN 47619-0000

City State ZIP Code

Warrick

County

What is the property? Check all that apply

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☒ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Contract to purchase, property in sellers name
2000 Fleetwood Mobile Home located on 2 rented lots in Lynnville Park
Value based on 2016 Tax Assessment

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$74,600.00

Current value of the portion you own?

\$74,600.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Contract to Purchase☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$162,600.00**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No☒ Yes3.1 Make: **Chevrolet**Model: **Trailblazer**Year: **2004**Approximate mileage: **187,000**

Other information:

vin: 1GNDT13S742418343
Value based on 2016 NADA
Joint

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$4,975.00

Current value of the portion you own?

\$4,975.003.2 Make: **Pontiac**Model: **Grand Prix**Year: **2002**Approximate mileage: **176,000**

Other information:

vin: 1G2WP52K22F148219
Value based on 2016 NADA
Joint

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$1,800.00

Current value of the portion you own?

\$1,800.00

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

3.3 Make: **Harley Davidson**
 Model: **XL1200C**
 Year: **2007**
 Approximate mileage: _____
 Other information: _____

vin: 1HD1CT3187K419437
Value based on 2016 NADA
Joint

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$4,630.00**\$4,630.00**

3.4 Make: **Suzuki**
 Model: **LT-A400F**
 Year: **2007**
 Approximate mileage: **800**
 Other information: _____

vin: 5SAAk46K877102746
wrecked
Value based on debtor's
estimate
Joint

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$200.00**\$200.00**

3.5 Make: **Assembled**
 Model: **1 Axle Trailer**
 Year: **2002**
 Approximate mileage: _____
 Other information: _____

Value based on debtor's
estimate
Wife

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$100.00**\$100.00**

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☐ No☒ Yes

4.1 Make: **Grumman**
 Model: **Jon Boat**
 Year: **1978**
 Other information: _____

12 Foot Boat
Value based on 2007 purchase
price

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$100.00**\$100.00**

4.2 Make: **Boat Trailer**
 Model: _____
 Year: **1979**
 Other information: _____

Value based on 2007 purchase
price

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$100.00**\$100.00**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$11,905.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

3 beds, 4 dressers, 2 night stands, 1 cedar chests, 1 coffee table, 2 end tables, 1 rocking chair, 1 china hutch, 1 desk, linens, kitchenware, cookware, kitchen accessoires, 1 tv stand, 1 table with chairs, 1 refrigerator, 1 stove, 1 microwave, 1 washer, 1 dryer, 1 freezer, 1 lawn mower, 1 set of patio furniture, grill

\$1,200.00

**1 couch and 1 love seat
rent to own**

\$500.00**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

1 tv, 1 vcr player, 2 dvd players, 1 computer, 1 camcorder

\$300.00**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe.....

Assorted books, nick-nacks, and misc dvds and cds

\$100.00**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☐ No

☒ Yes. Describe.....

2 shot guns

\$85.00**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Used clothing

\$500.00

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No☒ Yes. Describe.....

Gold and diamond wedding set, diamond earrings, misc costume jewelry

\$410.00**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

☐ No☒ Yes. Describe.....

1 old dog

\$25.00**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here****\$3,120.00****Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No☒ Yes.....**Cash****\$42.00****17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes.....

Institution name:

17.1. **Health Savings Account**

Old National Bank Husband

\$639.62

17.2. **Checking**

Evansville Teachers Federal Credit Union joint
***negative at time of filing**

\$0.00

17.3. **Savings**

Evansville Teachers Federal Credit Union joint

\$10.00

17.4. **Savings**

Lynnville National Bank joint with grandchild

\$11.00

17.5. **savings**

Lynnville National Bank joint with grandchild

\$21.95

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

18. Bonds, mutual funds, or publicly traded stocks*Examples: Bond funds, investment accounts with brokerage firms, money market accounts*☒ No☐ Yes..... Institution or issuer name:**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☒ No☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans*☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☐ No☒ Yes.

Institution name or individual:

Water**Lynnville Utilities****\$100.00****23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes..... Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples: Internet domain names, websites, proceeds from royalties and licensing agreements*☒ No☐ Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles***Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses*☒ No☐ Yes. Give specific information about them...**Money or property owed to you?**

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☐ No
☒ Yes. Give specific information.....

**Joint debtor is owed back child support,
which is now uncollectible**

Child support**\$17,000.00****30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☐ No
☒ Yes. Name the insurance company of each policy and list its value.
 Company name:

Beneficiary:

Surrender or refund value:

**Accidental death life insurance with
Fidelity Life**

spouse**\$0.00****32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☐ No
☒ Yes. Describe each claim.....

**Joint debtor was involved in a wreck on 05/18/15. She is in
the process of filing a personal injury lawsuit with Gerling
Law.**

\$0.00**35. Any financial assets you did not already list**

- ☒ No
☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**\$17,824.57****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

| | | |
|--|--------------------|---|
| 55. Part 1: Total real estate, line 2 | | \$162,600.00 |
| 56. Part 2: Total vehicles, line 5 | \$11,905.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$3,120.00 | |
| 58. Part 4: Total financial assets, line 36 | \$17,824.57 | |
| 59. Part 5: Total business-related property, line 45 | \$0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$0.00 | |
| 62. Total personal property. Add lines 56 through 61... | \$32,849.57 | Copy personal property total \$32,849.57 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$195,449.57 |

Fill in this information to identify your case:

| | | | |
|---|------------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Jacqueline S Weil | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | SOUTHERN DISTRICT OF INDIANA | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing
Official Form 106C**Schedule C: The Property You Claim as Exempt**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small> | Amount of the exemption you claim <small>Check only one box for each exemption.</small> | Specific laws that allow exemption |
|---|--|---|------------------------------------|
| 217 Deer Lane Lynnville, IN 47619 Warrick County Contract to purchase, property in sellers name 2000 Fleetwood Mobile Home located on 2 rented lots in Lynnville Park Value based on 2016 Tax Assessment Line from <i>Schedule A/B</i> : 1.2 | \$74,600.00 | <input checked="" type="checkbox"/> \$12,294.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(1) |
| 2004 Chevrolet Trailblazer 187,000 miles vin: 1GNDT13S742418343 Value based on 2016 NADA Joint Line from <i>Schedule A/B</i> : 3.1 | \$4,975.00 | <input checked="" type="checkbox"/> \$1,510.47 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 2002 Pontiac Grand Prix 176,000 miles vin: 1G2WP52K22F148219 Value based on 2016 NADA Joint Line from <i>Schedule A/B</i> : 3.2 | \$1,800.00 | <input checked="" type="checkbox"/> \$1,800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own <small>Copy the value from Schedule A/B</small> | Amount of the exemption you claim <small>Check only one box for each exemption.</small> | Specific laws that allow exemption |
|--|---|---|------------------------------------|
| 2007 Harley Davidson XL1200C vin: 1HD1CT3187K419437 Value based on 2016 NADA Joint Line from Schedule A/B: 3.3 | <u>\$4,630.00</u> | <input checked="" type="checkbox"/> <u>\$3,013.62</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 2007 Suzuki LT-A400F 800 miles vin: 5SAAK46K877102746 wrecked Value based on debtor's estimate Joint Line from Schedule A/B: 3.4 | <u>\$200.00</u> | <input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 2002 Assembled 1 Axle Trailer Value based on debtor's estimate Wife Line from Schedule A/B: 3.5 | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 1978 Grumman Jon Boat 12 Foot Boat Value based on 2007 purchase price Line from Schedule A/B: 4.1 | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 1979 Boat Trailer Value based on 2007 purchase price Line from Schedule A/B: 4.2 | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 3 beds, 4 dressers, 2 night stands, 1 cedar chests, 1 coffee table, 2 end tables, 1 rocking chair, 1 china hutch, 1 desk, linens, kitchenware, cookware, kitchen accessoires, 1 tv stand, 1 table with chairs, 1 refrigerator, 1 stove, 1 microwave, 1 washer, 1 Line from Schedule A/B: 6.1 | <u>\$1,200.00</u> | <input checked="" type="checkbox"/> <u>\$1,200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 1 tv, 1 vcr player, 2 dvd players, 1 computer, 1 camcorder Line from Schedule A/B: 7.1 | <u>\$300.00</u> | <input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| Assorted books, nick-nacks, and misc dvds and cds Line from Schedule A/B: 8.1 | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 2 shot guns Line from Schedule A/B: 10.1 | <u>\$85.00</u> | <input checked="" type="checkbox"/> <u>\$85.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| Used clothing Line from Schedule A/B: 11.1 | <u>\$500.00</u> | <input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own <small>Copy the value from Schedule A/B</small> | Amount of the exemption you claim <small>Check only one box for each exemption.</small> | Specific laws that allow exemption |
|--|---|---|-------------------------------------|
| Gold and diamond wedding set, diamond earrings, misc costume jewelry Line from Schedule A/B: 12.1 | \$410.00 | <input checked="" type="checkbox"/> \$410.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| 1 old dog Line from Schedule A/B: 13.1 | \$25.00 | <input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(2) |
| Cash Line from Schedule A/B: 16.1 | \$42.00 | <input checked="" type="checkbox"/> \$42.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(3) |
| Health Savings Account: Old National Bank Husband Line from Schedule A/B: 17.1 | \$639.62 | <input checked="" type="checkbox"/> \$639.62 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(8) |
| Savings: Evansville Teachers Federal Credit Union joint Line from Schedule A/B: 17.3 | \$10.00 | <input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(3) |
| Savings: Lynnville National Bank joint with grandchild Line from Schedule A/B: 17.4 | \$11.00 | <input checked="" type="checkbox"/> \$11.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(3) |
| savings: Lynnville National Bank joint with grandchild Line from Schedule A/B: 17.5 | \$21.95 | <input checked="" type="checkbox"/> \$21.95 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Ind. Code § 34-55-10-2(c)(3) |

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Fill in this information to identify your case:

| | | | |
|---|------------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Jacqueline S Weil | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | SOUTHERN DISTRICT OF INDIANA | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|---|--|--|---|
| 2.1 CNAC Creditor's Name Db a JD Byrider 2116 First Ave Evansville, IN 47710 Number, Street, City, State & Zip Code | Describe the property that secures the claim: 2004 Chevrolet Trailblazer 187,000 miles vin: 1GNDT13S742418343 Value based on 2016 NADA Joint As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Auto Loan | \$3,464.53 | \$4,975.00 |
| Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt | | | |
| Date debt was incurred 03/2013 | Last 4 digits of account number 7068 | | |

| | | | | |
|---|--|-------------------|-------------------|---------------|
| 2.2 Harley Davidson Financial Creditor's Name PO Box 21829 Carson City, NV 89721 Number, Street, City, State & Zip Code | Describe the property that secures the claim: 2007 Harley Davidson XL1200C vin: 1HD1CT3187K419437 Value based on 2016 NADA Joint As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit | \$1,616.38 | \$4,630.00 | \$0.00 |
| Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | | | | |

Debtor 1 **Lee R Weil, II** Case number (if know) _____
 First Name Middle Name Last Name

Debtor 2 **Jacqueline S Weil**
 First Name Middle Name Last Name

☐ Check if this claim relates to a community debt ☒ Other (including a right to offset) **Auto Loan**

Date debt was incurred **03/2010** Last 4 digits of account number **7639**

| | | | | | |
|-----|--|--|----------------|--------------------|----------------|
| 2.3 | Indiana Housing And Community Creditor's Name | Describe the property that secures the claim: | Unknown | \$88,000.00 | Unknown |
| | 30 S Meridian St Indianapolis, IN 46204 Number, Street, City, State & Zip Code | 2nd Mortgage 3129 Arlington Ave Evansville, IN 47712 The house is set for Sheriff Sale on 07/28/2016. The debtors have moved out of the property. As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ | | | |

Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____ Last 4 digits of account number _____

| | | | | | |
|-----|---|--|--------------------|--------------------|---------------|
| 2.4 | Mary Lou Welch (Weil) Creditor's Name | Describe the property that secures the claim: | \$62,306.00 | \$74,600.00 | \$0.00 |
| | 3699 Bethany Church Rd Boonville, IN 47601 Number, Street, City, State & Zip Code | Mobile home located at 217 Deer Lane Lynnvile, IN 47619 Contract to purchase As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Contract for Purchase | | | |

Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred **01/2016** Last 4 digits of account number _____

| | | | | | |
|-----|---|--|--------------------|--------------------|---------------|
| 2.5 | Wells Fargo Bank, N.A. Creditor's Name | Describe the property that secures the claim: | \$84,237.91 | \$88,000.00 | \$0.00 |
| | 3476 Stateview Blvd Attn: Bankruptcy Department MAC D3347-01 Fort Mill, SC 29715 Number, Street, City, State & Zip Code | Mortgage Foreclosure 82C01-1510-MF-005347 3129 Arlington Ave Evansville, IN 47712 The house is set for Sheriff Sale on 07/28/2016. As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | |

Debtor 1 **Lee R Weil, II**

Case number (if know) _____

First Name Middle Name Last Name

Debtor 2 **Jacqueline S Weil**

First Name Middle Name Last Name

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)**Mortgage**Date debt was incurred **09/2006**Last 4 digits of account number **5347**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$151,624.82

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$151,624.82**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.



Name, Number, Street, City, State & Zip Code

CNAC Finance Co.**7400 N Shadeland Ave Ste 200****Indianapolis, IN 46250**On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number ____



Name, Number, Street, City, State & Zip Code

Unterberg & Associates, PC**8050 Cleveland Place****Merrillville, IN 46410**On which line in Part 1 did you enter the creditor? **2.5**

Last 4 digits of account number ____

Fill in this information to identify your case:

| | | | |
|---|------------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Jacqueline S Weil | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | SOUTHERN DISTRICT OF INDIANA | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☒ No. Go to Part 2.

☐ Yes.
Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

| | | | |
|-----|--|--|-------------------------------------|
| 4.1 | American General Finance Nonpriority Creditor's Name PO Box 3251 Evansville, IN 47715 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 1433 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Lawsuit dismissed with out prejudice 05/2004 82D03-0104-CP-01433 NOTICE ONLY | Total claim \$0.00 |
|-----|--|--|-------------------------------------|

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.2

Apria Health Care

Nonpriority Creditor's Name

PO Box 802017**Chicago, IL 60680**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **8472****\$118.58**When was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **medical bills**

4.3

Boonville Warrick County Public Library

Nonpriority Creditor's Name

611 W Main St**Boonville, IN 47601**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number _____

\$29.92When was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **library fees**

4.4

Capital One

Nonpriority Creditor's Name

Attn: Bankruptcy Dept.**PO Box 54529****Oklahoma City, OK 73154-4529**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number _____

\$1,048.00When was the debt incurred? **12/2005**

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **credit card**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.5

CitiFinancial

Nonpriority Creditor's Name

PO Box 6043**Sioux Falls, SD 57104**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$0.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **any possible claim**

4.6

Clark Braun

Nonpriority Creditor's Name

6177 Pfafflin Lake Blvd**Newburgh, IN 47630**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **4985****\$2,662.63**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Judgment
82D06-0007-SC-4985
rent & damages**

4.7

Clark Braun

Nonpriority Creditor's Name

6177 Pfafflin Lake Blvd**Newburgh, IN 47630**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2908****\$0.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Lawsuit dismissed with out prejudice
08/2002
82D03-0108-CP-02908
NOTICE ONLY**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.8

Collection Associates

Nonpriority Creditor's Name

**ndba Receivables Management
Partners
1809 N Broadway St
Greensburg, IN 47240-8217**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **1110****\$4,885.40**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

Judgment**82D06-1411-SC-011110**☒ Other. Specify **medical bills**

4.9

Credit First NA

Nonpriority Creditor's Name

**PO Box 81344
Cleveland, OH 44181-8026**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number _____

\$390.00When was the debt incurred? **04/2008**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **credit card**4.1
0**Deaconess Anesthesia**

Nonpriority Creditor's Name

**600 Mary St
Evansville, IN 47711**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number _____

\$0.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **any possible claim**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.1
1**Deaconess Gateway Hospital**

Nonpriority Creditor's Name

**4011 Gateway Blvd
Newburgh, IN 47630**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ Yes

Last 4 digits of account number _____

\$0.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **any possible claim for debt involved in pending litigation regarding auto accident on 05/18/15**

4.1
2**Deaconess Hospital**

Nonpriority Creditor's Name

**PO Box 152
Evansville, IN 47701-0152**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ Yes

Last 4 digits of account number _____

various accounts**\$4,201.63**

When was the debt incurred? _____

prior to filing

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **medical bills**

4.1
3**Deaconess Hospital Inc**

Nonpriority Creditor's Name

**600 Mary Street
Evansville, IN 47747**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ Yes

Last 4 digits of account number _____

4967**\$16,484.02**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Judgment
82D05-1509-CC-004967
medical bills**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.1
4**Deaconess Hospital Inc**

Nonpriority Creditor's Name

**600 Mary Street
Evansville, IN 47747**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ YesLast 4 digits of account number **6108****\$2,027.14**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

Judgment**82D06-1406-SC-06108**☒ Other. Specify **medical bills**4.1
5**Deaconess Hospital Inc**

Nonpriority Creditor's Name

**600 Mary Street
Evansville, IN 47747**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ YesLast 4 digits of account number **8075****\$3,665.10**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

Judgment**82D06-1508-SC-008075**☒ Other. Specify **medical bills**4.1
6**Deaconess Hospital Inc**

Nonpriority Creditor's Name

**600 Mary Street
Evansville, IN 47747**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ YesLast 4 digits of account number **various****\$5,991.75**When was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **debt involved in pending litigation regarding auto accident on 05/18/15**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.1
7**Debbie & Harold Beumel**Last 4 digits of account number **7441****\$0.00**

Nonpriority Creditor's Name

**5673 Riverwalk Cir
Newburgh, IN 47630**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts**Lawsuit dismissed with out prejudice
10/2002****82D06-0208-SC-07441**☒ Other. Specify**NOTICE ONLY**4.1
8**Dianne & Bobby King**Last 4 digits of account number **2438****\$662.01**

Nonpriority Creditor's Name

**313 N Englewood
Evansville, IN 47711**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts**Judgment****82D06-9512-SC-12438**☒ Other. Specify**rent & damages**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.1
9**Doyle & June Kifer**Last 4 digits of account number **1587****\$0.00**

Nonpriority Creditor's Name

**4200 Wyntree Dr
Newburgh, IN 47630**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts**Lawsuit dismissed with out prejudice****01/1999****82D06-9812-SC-11587****NOTICE ONLY**☒ Other. Specify _____4.2
0**Evansville Radiology PC**Last 4 digits of account number **various accounts****\$705.00**

Nonpriority Creditor's Name

**350 W Columbia St Ste 420
Evansville, IN 47710**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesWhen was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **medical bills**4.2
1**Evansville Radiology PC**Last 4 digits of account number **various****\$2.19**

Nonpriority Creditor's Name

**350 W Columbia St Ste 420
Evansville, IN 47710**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesWhen was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **debt involved in pending litigation regarding auto accident on 05/18/15**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.2
2**Evansville Water & Sewer Utilitiy**Last 4 digits of account number **8959****\$263.71**

Nonpriority Creditor's Name

**1 NW Martin Luther King Blvd
 Room 104
 Evansville, IN 47708**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **utilities for 3129 Arlington Ave**4.2
3**Lee Wedding-Cooper**Last 4 digits of account number **8801****\$0.00**

Nonpriority Creditor's Name

**1901 Plantation Ct Apt B
 Evansville, IN 47714**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No

- ☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

**Lawsuit dismissed with out prejudice
 11/1999
 82D06-9910-SC-08801
 NOTICE ONLY**

4.2
4**Midwest Neurological PC**Last 4 digits of account number **various accounts****\$345.46**

Nonpriority Creditor's Name

**PO Box 5349
 Evansville, IN 47716-5349**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **medical bills**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.2
5**Norman H Hebber (Deceased)**

Nonpriority Creditor's Name

C/O Charles A. Spaetti
5011 Washington Ave Suite 103
Evansville, IN 47715

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **6940****\$1,530.90**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

Judgment
82D06-0208-SC-06940
☒ Other. Specify **rent & damages**

4.2
6**OneMain Financial**

Nonpriority Creditor's Name

600 East Diamond Ave
Evansville, IN 47711

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **2271****\$16,174.12**When was the debt incurred? **01/01/16**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **unsecured loan**4.2
7**Orthopaedic Associates**

Nonpriority Creditor's Name

515 Read Street
Evansville, IN 47710

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **various****\$50.00**When was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **debt involved in pending litigation regarding auto accident on 05/18/15**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.2
8**Orthopaedic Associates Evansville**

Nonpriority Creditor's Name

Patient Bill Processing Center
PO Box 102594
Atlanta, GA 30368

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

**various
accounts****\$50.00**

When was the debt incurred?

prior to filing

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **medical bills**

4.2
9**Rockers Chiropractic**

Nonpriority Creditor's Name

2836 Mt. Vernon Ave
Evansville, IN 47712

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No

- ☐ Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

- ☒ Other. Specify **any possible claim for debt involved in pending litigation regarding auto accident on 05/18/15**

4.3
0**Ronald K Reinhardt**

Nonpriority Creditor's Name

3114 S Weinbach
Evansville, IN 47714

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No

- ☐ Yes

Last 4 digits of account number

8063**\$698.79**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

- ☒ Other. Specify **Judgment
82D06-9409-SC-08063
rent & damages**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.3
1**Sears Credit Card Services**

Nonpriority Creditor's Name

PO Box 6286**Sioux Falls, SD 57104**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

\$0.00**When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify any possible claim4.3
2**Southern Indiana Imaging Consultants**

Nonpriority Creditor's Name

PO Box 138**Evansville, IN 47701-0138**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

various accounts**\$27.00****When was the debt incurred?** _____**prior to filing****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify medical bills4.3
3**St. Mary's Convenient Care &**

Nonpriority Creditor's Name

Occupational Medicine**2330 Lynch Rd****Evansville, IN 47711**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

various accounts**\$752.00****When was the debt incurred?** _____**prior to filing****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify medical bills

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.3
4**St. Mary's Medical Center**

Nonpriority Creditor's Name
3700 Washington Ave
Evansville, IN 47714

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

**various
accounts****\$878.97**

When was the debt incurred?

prior to filing

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **medical bills**4.3
5**Time Warner Cable**

Nonpriority Creditor's Name
104 South Woodburn Dr
Dothan, AL 36305

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

2203**\$346.52**

When was the debt incurred?

prior to filing

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **utilities**4.3
6**Vectren Energy Delivery**

Nonpriority Creditor's Name
Attn Sharon Armstrong
PO Box 209
Evansville, IN 47702

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

8056**\$364.00**

When was the debt incurred?

2015

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **utilities**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.3
7**Walt & Lynn Lowe**Last 4 digits of account number **7443****\$151.38**

Nonpriority Creditor's Name

**1009 S Burkhardt Rd
Evansville, IN 47715**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts**Judgment****82D06-9209-SC-07443**☒ Other. Specify**rent & damages**4.3
8**Walt & Lynn Lowe**Last 4 digits of account number **1523****\$0.00**

Nonpriority Creditor's Name

**1009 S Burkhardt Rd
Evansville, IN 47715**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts**Lawsuit****82D06-9702-SC-01523**☒ Other. Specify**rent**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

4.3
9**Walt & Lynn Lowe**

Nonpriority Creditor's Name
1009 S Burkhardt Rd
Evansville, IN 47715

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ YesLast 4 digits of account number **1774****\$0.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

Lawsuit dismissed with out prejudice**01/1997****82D06-9612-SC-11774****NOTICE ONLY**☒ Other. Specify _____4.4
0**Welborn Clinic**

Nonpriority Creditor's Name
421 Chestnut St
Evansville, IN 47708

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ Yes

Last 4 digits of account number _____

\$0.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **any possible claim for medical bills**4.4
1**William M Roberts, MD**

Nonpriority Creditor's Name
4099 Gateway Blvd
Newburgh, IN 47630

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No

☐ YesLast 4 digits of account number **various accounts****\$130.45**When was the debt incurred? **prior to filing**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **medical bills****Part 3: List Others to Be Notified About a Debt That You Already Listed**

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address
American Acceptance Company
LLC
c/o Glenn Vician
8605 Broadway
Merrillville, IN 46410

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Blatt, Hasenmiller, Lebsker &
Moore LLC
8605 Broadway
Merrillville, IN 46410

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Cash Pro
101 Plaza East Blvd Ste 100
Evansville, IN 47715

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Cash Pro
101 Plaza East Blvd Ste 100
Evansville, IN 47715

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.32 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Charles A. Spaetti
5011 Washington Ave Suite 103
Evansville, IN 47715

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.25 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Client Services
3451 Harry S Truman Blvd
St Charles, MO 63301-4047

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.35 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Collection Associates
ndba Receivables Management
Partners
1809 N Broadway St
Greensburg, IN 47240-8217

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Complete Billing Services
517 US Hwy 31 North
Greenwood, IN 46142

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Credit Management
4200 International Pkwy
Carrollton, TX 75007

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.35 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Deaconess Emergency Physicians
PO Box 3407
Evansville, IN 47733-3407

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know)

Name and Address
Deaconess Gateway Hospital ER
Phys
4011 Gateway Blvd
Newburgh, IN 47630

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Deaconess Health System
PO Box 1230
Evansville, IN 47706-1230

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Deaconess Health System
PO Box 1230
Evansville, IN 47706-1230

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Deaconess Single Billing
Deaconess Single Billing (EPIC)
PO Box 1230
Evansville, IN 47706

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dennis J Beck MD
533 W Columbia St
C/O Orthopaedic Associates
Evansville, IN 47710

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dodson & Schaefer
PO Box 2059
Evansville, IN 47714

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
EPI Finance Group, LLC
517 US Highway 31 N
Greenwood, IN 46142-3932

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Ethelyn Rheinhardt
Creditor Deceased

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Global Receivables Solutions, Inc.
2703 N Hwy 75
Sherman, TX 75090

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Global Receivables Solutions, Inc.
2703 N Hwy 75
Sherman, TX 75090

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.36** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Hoosier Accounts Service
PO Box 4007
Evansville, IN 47724-0007

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

Hoosier Accounts Service
PO Box 4007
Evansville, IN 47724-0007

Line **4.34** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Hoosier Accounts Service
PO Box 4007
Evansville, IN 47724-0007

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Kahn, Dees, Donovan & Kahn
PO Box 3646
Evansville, IN 47735-3646

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.13** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Kahn, Dees, Donovan & Kahn
PO Box 3646
Evansville, IN 47735-3646

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Kahn, Dees, Donovan & Kahn
PO Box 3646
Evansville, IN 47735-3646

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.37** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Keymed Data Services
PO Box 102607
Atlanta, GA 30368

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Med 1 Solutions
517 US Hwy 31 N
Greenwood, IN 46142

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Med 1 Solutions
517 US Hwy 31 N
Greenwood, IN 46142

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Medical & Professional Collection
Svc.
5055 Newburgh Plaza South
Newburgh, IN 47630

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Medical & Professional Collection
Svc.
5055 Newburgh Plaza South
Newburgh, IN 47630

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Medical & Professional Collection
Svc.
5055 Newburgh Plaza South
Newburgh, IN 47630

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.41** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

Medical & Professional Collection Svc.
5055 Newburgh Plaza South
Newburgh, IN 47630

Line **4.12** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
National Recovery Agency
2491 Paxton St
Harrisburg, PA 17111

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.36** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Republic Bank
c/o EPI Finance Group
517 US Highway 31 North
Greenwood, IN 46142

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Rev 1 Solutions
517 US Hwy 31 N
Greenwood, IN 46142

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Richard M Reinhardt
3114 S Weinbach
Evansville, IN 47714

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Source Receivables Management
4615 Dundas Dr Ste 102
Greensboro, NC 27407

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.36** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Springleaf Finance Management Corp.
Fdba American General Finance
PO Box 3212
Evansville, IN 47731

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
St. Mary's
7109 Reliable Parkway
Chicago, IL 60686

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Stellar Recovery
4500 Salisbury Road Suite 10
Jacksonville, FL 32216

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.35** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Time Warner Cable SWO Division
PO Box 1060
Carol Stream, IL 60132-1060

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.35** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
West Asset Management
PO Box 790113
St Louis, MO 63179

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.36** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if know) _____

Name and Address
Western Alliance Bank
PO Box 927830
San Diego, CA 92192

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Ziemer Stayman Weitzel & Shoulders
20 NW First Street 9th Fl
PO Box 916
Evansville, IN 47706

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | |
|--------------------------------|---|-----|----|------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$ | 0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$ | 0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 64,636.67 |
| | 6j. Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 64,636.67 |

Fill in this information to identify your case:

| | | | |
|---|------------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Jacqueline S Weil | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | SOUTHERN DISTRICT OF INDIANA | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?**

☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--|---|
| 2.1 | Aaron's 511 E Diamond Avenue Evansville, IN 47711 | Rent to own- 8 months remaining |
| 2.2 | Lynnville Park & Recreation 207 S Main St Lynnville, IN 47619 | Lot Rent- 98 years remaining |

Fill in this information to identify your case:

| | | | |
|---|------------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Jacqueline S Weil | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | SOUTHERN DISTRICT OF INDIANA | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 **Chris Bates**
19 E Oregon St
Evansville, IN 47710

- ☐ Schedule D, line _____
☒ Schedule E/F, line **4.17**
☐ Schedule G _____
Debbie & Harold Beumel

3.2 **Erick R Robertson**
1826 S Bosse
Evansville, IN 47712

- ☐ Schedule D, line _____
☒ Schedule E/F, line **4.7**
☐ Schedule G _____
Clark Braun

3.3 **Shannon S Fisher**
718 maxwell Ave
Evansville, IN 47711

- ☐ Schedule D, line _____
☒ Schedule E/F, line **4.30**
☐ Schedule G _____
Ronald K Reinhardt

Debtor 1 **Lee R Weil, II**
Jacqueline S Weil

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.4 **Shannon S Fisher**
718 maxwell Ave
Evansville, IN 47711

☐ Schedule D, line _____
☒ Schedule E/F, line **4.18**
☐ Schedule G _____
Dianne & Bobby King

3.5 **Shannon S Fisher**
718 maxwell Ave
Evansville, IN 47711

☐ Schedule D, line _____
☒ Schedule E/F, line **4.39**
☐ Schedule G _____
Walt & Lynn Lowe

Fill in this information to identify your case:

Debtor 1 Lee R Weil, II

Debtor 2 Jacqueline S Weil
(Spouse, if filing)

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status**Occupation****Employer's name****Employer's address****Debtor 1**

- ☒ Employed
- ☐ Not employed

LaborerMitchell Maintenance849 N Old Highway 41
Princeton, IN 47670**How long employed there?**3 year, 7 months**Debtor 2 or non-filing spouse**

- ☒ Employed
- ☐ Not employed

ServerThe Pie Pan905 North Park Dr
Evansville, IN 4771111 years**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | | For Debtor 1 | For Debtor 2 or non-filing spouse |
|----|--|--------------------|-----------------------------------|
| 2. | List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | \$ <u>2,511.17</u> | \$ <u>752.14</u> |
| 3. | Estimate and list monthly overtime pay. | +\$ <u>0.00</u> | +\$ <u>0.00</u> |
| 4. | Calculate gross income. Add line 2 + line 3. | \$ <u>2,511.17</u> | \$ <u>752.14</u> |

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|------------------------|-----------------------------------|
| Copy line 4 here | 4. \$ 2,511.17 | \$ 752.14 |
| 5. List all payroll deductions: | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$ 300.69 | \$ 142.57 |
| 5b. Mandatory contributions for retirement plans | 5b. \$ 0.00 | \$ 0.00 |
| 5c. Voluntary contributions for retirement plans | 5c. \$ 0.00 | \$ 0.00 |
| 5d. Required repayments of retirement fund loans | 5d. \$ 0.00 | \$ 0.00 |
| 5e. Insurance | 5e. \$ 407.33 | \$ 0.00 |
| 5f. Domestic support obligations | 5f. \$ 0.00 | \$ 0.00 |
| 5g. Union dues | 5g. \$ 0.00 | \$ 0.00 |
| 5h. Other deductions. Specify: Uniform | 5h.+ \$ 39.52 | \$ 0.00 |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. \$ 747.54 | \$ 142.57 |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. \$ 1,763.63 | \$ 609.57 |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. \$ 0.00 | \$ 0.00 |
| 8b. Interest and dividends | 8b. \$ 0.00 | \$ 0.00 |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. \$ 0.00 | \$ 0.00 |
| 8d. Unemployment compensation | 8d. \$ 0.00 | \$ 0.00 |
| 8e. Social Security | 8e. \$ 0.00 | \$ 0.00 |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: TANF for Grandchildren | 8f. \$ 256.00 | \$ 0.00 |
| 8g. Pension or retirement income | 8g. \$ 0.00 | \$ 0.00 |
| 8h. Other monthly income. Specify: Family Assistance | 8h.+ \$ 300.00 | \$ 0.00 |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. \$ 556.00 | \$ 0.00 |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ 2,319.63 | \$ 609.57 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: | | |
| | 11. +\$ 0.00 | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies | 12. \$ 2,929.20 | |
| 13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: Debtor was laid off temporarily prior to filing and anticipates returning as soon as possible. | | |

Combined
monthly income

Fill in this information to identify your case:

Debtor 1 Lee R Weil, II

Debtor 2 Jacqueline S Weil
(Spouse, if filing)

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number
(If known) _____

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.☒ Yes. Does Debtor 2 live in a separate household?☒ No☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Grandson

5

☐ No☒ Yes

Grandson

7

☐ No☒ Yes

Granddaughter

11

☐ No☒ Yes☐ No☐ Yes3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 250.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 39.05

4b. Property, homeowner's, or renter's insurance

4b. \$ 117.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

6. Utilities:

| | | |
|--|--------|---------------|
| 6a. Electricity, heat, natural gas | 6a. \$ | <u>200.00</u> |
| 6b. Water, sewer, garbage collection | 6b. \$ | <u>185.00</u> |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | <u>200.00</u> |
| 6d. Other. Specify: _____ | 6d. \$ | <u>0.00</u> |

7. Food and housekeeping supplies7. \$ 475.00**8. Childcare and children's education costs**8. \$ 5.00**9. Clothing, laundry, and dry cleaning**9. \$ 80.00**10. Personal care products and services**10. \$ 75.00**11. Medical and dental expenses**11. \$ 100.00**12. Transportation.** Include gas, maintenance, bus or train fare.
Do not include car payments.12. \$ 150.00**13. Entertainment, clubs, recreation, newspapers, magazines, and books**13. \$ 0.00**14. Charitable contributions and religious donations**14. \$ 0.00**15. Insurance.**

Do not include insurance deducted from your pay or included in lines 4 or 20.

| | | |
|--------------------------------------|---------|---------------|
| 15a. Life insurance | 15a. \$ | <u>43.87</u> |
| 15b. Health insurance | 15b. \$ | <u>0.00</u> |
| 15c. Vehicle insurance | 15c. \$ | <u>230.00</u> |
| 15d. Other insurance. Specify: _____ | 15d. \$ | <u>0.00</u> |

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____16. \$ 0.00**17. Installment or lease payments:**

| | | |
|---|---------|---------------|
| 17a. Car payments for Vehicle 1 | 17a. \$ | <u>371.35</u> |
| 17b. Car payments for Vehicle 2 | 17b. \$ | <u>221.78</u> |
| 17c. Other. Specify: <u>Rent to Own</u> | 17c. \$ | <u>114.00</u> |
| 17d. Other. Specify: _____ | 17d. \$ | <u>0.00</u> |

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).18. \$ 0.00**19. Other payments you make to support others who do not live with you.**\$ 0.00

Specify: _____

19.

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

| | | |
|---|---------|-------------|
| 20a. Mortgages on other property | 20a. \$ | <u>0.00</u> |
| 20b. Real estate taxes | 20b. \$ | <u>0.00</u> |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | <u>0.00</u> |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | <u>0.00</u> |
| 20e. Homeowner's association or condominium dues | 20e. \$ | <u>0.00</u> |

21. Other: Specify: Lot rent21. +\$ 40.17**Pet Food and Care**+\$ 30.00**22. Calculate your monthly expenses**

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

| | |
|----|-----------------|
| \$ | <u>2,927.22</u> |
| \$ | |
| \$ | <u>2,927.22</u> |

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

| | |
|----------|-----------------|
| 23a. \$ | <u>2,929.20</u> |
| 23b. -\$ | <u>2,927.22</u> |

23c. Subtract your monthly expenses from your monthly income.
The result is your *monthly net income*.

23c. \$ 1.98**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.☒ Yes.

| |
|--|
| Explain here: Debtors receive help from their church in the form of groceries. Their additional grocery expense is reflected above. |
|--|

Fill in this information to identify your case:

| | | | |
|---|-------------------------------------|-------------|-----------|
| Debtor 1 | Lee R Weil, II | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Jacqueline S Weil | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | <u>SOUTHERN DISTRICT OF INDIANA</u> | | |
| Case number (if known) | <u></u> | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Lee R Weil, II

Lee R Weil, II
Signature of Debtor 1

Date June 23, 2016

X /s/ Jacqueline S Weil

Jacqueline S Weil
Signature of Debtor 2

Date June 23, 2016

Fill in this information to identify your case:

Debtor 1 **Lee R Weil, II**
First Name Middle Name Last Name

Debtor 2 **Jacqueline S Weil**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 107**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

**217 Deer Lane
 Lynnville, IN 47619**

Dates Debtor 1 lived there

From-To:
08/2015 to current

Debtor 2 Prior Address:

☒ Same as Debtor 1

Dates Debtor 2 lived there

☒ Same as Debtor 1
 From-To:

**3129 Arlington Ave
 Evansville, IN 47712**

From-To:
2005 to 08/2015

☒ Same as Debtor 1

☒ Same as Debtor 1
 From-To:

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.*)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2 Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

Debtor 1

Sources of income
 Check all that apply.

Gross income
 (before deductions and exclusions)

Debtor 2

Sources of income
 Check all that apply.

Gross income
 (before deductions and exclusions)

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

| | Debtor 1 | | Debtor 2 | |
|---|--|--|--|--|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$10,830.00 | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$3,742.90 |
| For last calendar year: (January 1 to December 31, 2015) | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$29,009.55 | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$11,087.75 |
| For the calendar year before that: (January 1 to December 31, 2014) | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$31,194.00 | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$11,919.46 |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No
☒ Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | |
|---|--------------------------------------|--|--------------------------------------|--|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | TANF | \$1,536.00 | | |
| For last calendar year: (January 1 to December 31, 2015) | Federal Income Tax Refund | \$7,765.00 | | |
| | State Income Tax Refund | \$118.00 | | |
| For the calendar year before that: (January 1 to December 31, 2014) | Federal Income Tax Refund | \$7,244.00 | | |
| | State Income Tax Refund | \$83.00 | | |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- ☐ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for ... |
|--|------------------------------|-------------------|----------------------|---|
| Mary Lou Welch (Weil) 3699 Bethany Church Rd Boonville, IN 47601 | 03/2016, 04/2016, 05/2016 | \$1,347.00 | \$62,306.00 | <input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Mobile Home</u> |
| CNAC Dba JD Byrider 2116 First Ave Evansville, IN 47710 | 03/2016, 04/2016, 05/2016 | \$1,031.52 | \$3,464.53 | <input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other___ |
| Harley Davidson Financial PO Box 21829 Carson City, NV 89721 | 03/2016, 04/2016, 05/2016 | \$665.34 | \$1,616.38 | <input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other___ |

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an insider.

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|----------------------------|------------------|-------------------|----------------------|-------------------------|
|----------------------------|------------------|-------------------|----------------------|-------------------------|

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments to an insider

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
|----------------------------|------------------|-------------------|----------------------|--|
|----------------------------|------------------|-------------------|----------------------|--|

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No

☒ Yes. Fill in the details.

| Case title Case number | Nature of the case | Court or agency | Status of the case |
|---|----------------------|--|--|
| Deaconess Hospital vs Lee Weil 82D05-1509-CC-004967 | civil claim | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 11/2015 |
| Deaconess Hospital Inc vs Jacqueline S Weil 82D06-1406-SC-06108 | small claim | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 10/2014 |
| Wells Fargo Bank NA vs Lee & Jacqueline Wile, et al 82C01-1510-MF-005347 | mortgage foreclosure | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 04/2016 |
| W Walt Lowe vs Jacqueline Sue Wright 82D06-9209-SC-07443 | small claims | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 10/1992 |
| Norman H Hebbeler vs Jacqueline S Fisher et al 82D06-0208-SC-06940 | small claims | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 12/2002 |
| Collection Associates LLC vs Lee R Weil 82D06-1411-SC-011110 | small claims | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 01/2015 |
| Ronald K Rheinhardt vs Jacqueline S Fisher et al 82D06-9409-SC-08063 | small claims | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 10/1994 |

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

| Case title Case number | Nature of the case | Court or agency | Status of the case |
|---|--------------------|--|--|
| Clark Braun vs Jacqueline S Fisher 82D06-0007-SC-04985 | small claims | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 08/2000 |
| Dianne King vs Jackie Fisher et al 82D06-9512-SC-12438 | small claim | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 03/1996 |
| W Walt Lowe vs Jackie Fisher 82D06-9702-SC-01523 | small claims | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Lawsuit filed 02/1997 |
| Deaconess Hospital Inc vs Jacqueline S Weil 82D06-1508-SC-008075 | small claim | Vanderburgh Superior Court Courts Bldg, Civic Center Complex 825 Sycamore Street Evansville, IN 47708 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 01/2016 |

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
 Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

| Creditor Name and Address | Describe the Property Explain what happened | Date | Value of the property |
|---------------------------|--|------|-----------------------|
|---------------------------|--|------|-----------------------|

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- ☒ No
☐ Yes. Fill in the details.

| Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
|---------------------------|---------------------------------------|-----------------------|--------|
|---------------------------|---------------------------------------|-----------------------|--------|

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

- ☒ No
☐ Yes

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No

☐ Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|--|--------------------|--------------------------|-------|
| Person to Whom You Gave the Gift and Address: | | | |

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Dates you contributed | Value |
|--|-------------------------------|-----------------------|-------|
| Charity's Name Address (Number, Street, City, State and ZIP Code) | | | |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
|--|---|-------------------|------------------------|
| | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | | |

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

| Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|---|-----------------------------------|-------------------|
| Kinkade & Associates, P.C. 123 NW 4th Street Suite 201 Evansville, IN 47708-1709 kinkadeassociates@hotmail.com | Attorney Fees | 05/13/16 | \$965.00 |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

☒ No

☐ Yes. Fill in the details.

| Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--------------------------------|---|-----------------------------------|-------------------|
| | | | |

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
 Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

☐ No

☐ Yes. Fill in the details.

| Person Who Received Transfer Address | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|--------------------------------------|---|--|------------------------|
| Person's relationship to you | | | |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

☐ No

☐ Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date Transfer was made |
|---------------|---|------------------------|
| | | |

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☐ No

☐ Yes. Fill in the details.

| Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--|---------------------------------|-------------------------------|--|---|
| | | | | |

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☐ No

☐ Yes. Fill in the details.

| Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|--|---|-----------------------|-----------------------|
| | | | |

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☐ No

☐ Yes. Fill in the details.

| Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|---|--|-----------------------|-----------------------|
| | | | |

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☐ No

☐ Yes. Fill in the details.

| Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
|---|---|-----------------------|-------|
| | | | |

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ☐ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No
- ☐ Yes. Fill in the details.

| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--|---|-----------------------------------|----------------|
|--|---|-----------------------------------|----------------|

25. Have you notified any governmental unit of any release of hazardous material?

- No
- ☐ Yes. Fill in the details.

| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--|---|-----------------------------------|----------------|
|--|---|-----------------------------------|----------------|

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
- ☐ Yes. Fill in the details.

| Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
|---------------------------|---|--------------------|--------------------|
|---------------------------|---|--------------------|--------------------|

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

| Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed |
|--|---|--|
|--|---|--|

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No
- ☐ Yes. Fill in the details below.

| Name Address (Number, Street, City, State and ZIP Code) | Date Issued |
|---|-------------|
|---|-------------|

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Debtor 1 **Lee R Weil, II**
Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Lee R Weil, II
Lee R Weil, II
Signature of Debtor 1

/s/ Jacqueline S Weil
Jacqueline S Weil
Signature of Debtor 2

Date June 23, 2016

Date June 23, 2016

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 **Lee R Weil, II**
 First Name Middle Name Last Name

Debtor 2 **Jacqueline S Weil**
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number _____
 (if known)

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|---|--|
| Creditor's name: CNAC Description of property: 2004 Chevrolet Trailblazer 187,000 miles securing debt: vin: 1GNDT13S742418343 Value based on 2016 NADA Joint | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____ | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes |
| Creditor's name: Harley Davidson Financial Description of property: 2007 Harley Davidson XL1200C vin: 1HD1CT3187K419437 securing debt: Value based on 2016 NADA Joint | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____ | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes |
| Creditor's name: Indiana Housing And Community Description of property: _____ securing debt: _____ | <input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a _____ | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes |

Debtor 1 **Lee R Weil, II**
 Debtor 2 **Jacqueline S Weil**

Case number (if known) _____

Description of property **2nd Mortgage**
 securing debt: **3129 Arlington Ave Evansville, IN 47712**
The house is set for Sheriff Sale on 07/28/2016. The debtors have moved out of the property.

Reaffirmation Agreement.
☐ Retain the property and [explain]:

Creditor's name: **Mary Lou Welch (Weil)**
 Description of property **Mobile home located at 217 Deer Lane Lynnville, IN 47619**
 securing debt: **Contract to purchase**

☐ Surrender the property.
☐ Retain the property and redeem it.
☒ Retain the property and enter into a *Reaffirmation Agreement.*
☐ Retain the property and [explain]:

☐ No
☒ Yes

Creditor's name: **Wells Fargo Bank, N.A.**
 Description of property **Mortgage Foreclosure**
 securing debt: **82C01-1510-MF-005347**
3129 Arlington Ave Evansville, IN 47712
The house is set for Sheriff Sale on 07/28/2016.

☒ Surrender the property.
☐ Retain the property and redeem it.
☐ Retain the property and enter into a *Reaffirmation Agreement.*
☐ Retain the property and [explain]:

☐ No
☒ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases**Will the lease be assumed?**

Lessor's name: **Aaron's**

☐ No

☒ Yes

Description of leased Property: **Rent to own- 8 months remaining**

Lessor's name: **Lynnville Park & Recreation**

☐ No

☒ Yes

Description of leased Property: **Lot Rent- 98 years remaining**

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Lee R Weil, II
Lee R Weil, II
 Signature of Debtor 1

X /s/ Jacqueline S Weil
Jacqueline S Weil
 Signature of Debtor 2

Debtor 1 **Lee R Weil, II**
Debtor 2 **Jacqueline S Weil**

Case number *(if known)* _____

Date **June 23, 2016** _____

Date **June 23, 2016** _____

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C.
§ 101(8) as "incurred by an individual
primarily for a personal, family, or
household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under
one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan
for family farmers or
fishermen

Chapter 13 - Voluntary repayment plan
for individuals with regular
income

**You should have an attorney review your
decision to file for bankruptcy and the choice of
chapter.**

Chapter 7: Liquidation

| | |
|---------------|--------------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| <u>+ \$15</u> | <u>trustee surcharge</u> |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | | |
|---|---------|--------------------|
| | \$1,167 | filing fee |
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | |
|---|-------|--------------------|
| | \$200 | filing fee |
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | | |
|---|-------|--------------------|
| | \$235 | filing fee |
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Southern District of Indiana

In re **Lee R Weil, II**
Jacqueline S Weil

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | | |
|---|----|---------------|
| For legal services, I have agreed to accept | \$ | 965.00 |
| Prior to the filing of this statement I have received | \$ | 965.00 |
| Balance Due | \$ | 0.00 |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtor(s) in any dischargeability actions, motions to avoid liens, or redeem, added creditors, reaffirmation agreements, relief from stay actions, contested matters or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 23, 2016

Date

/s/ Kevin Kinkade

Kevin Kinkade

Signature of Attorney

Kinkade & Associates, P.C.

123 NW 4th Street

Suite 201

Evansville, IN 47708-1709

812-434-4909 Fax: 812-434-4831

kinkadeassociates@hotmail.com

Name of law firm

**United States Bankruptcy Court
Southern District of Indiana**

In re **Lee R Weil, II
Jacqueline S Weil**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **June 23, 2016**

/s/ Lee R Weil, II

Lee R Weil, II

Signature of Debtor

Date: **June 23, 2016**

/s/ Jacqueline S Weil

Jacqueline S Weil

Signature of Debtor

AARON'S
511 E DIAMOND AVENUE
EVANSVILLE, IN 47711

AMERICAN ACCEPTANCE COMPANY LLC
C/O GLENN VICIAN
8605 BROADWAY
MERRILLVILLE, IN 46410

AMERICAN GENERAL FINANCE
PO BOX 3251
EVANSVILLE, IN 47715

APRIA HEALTH CARE
PO BOX 802017
CHICAGO, IL 60680

BLATT, HASENMILLER, LEIBSKER & MOORE LLC
8605 BROADWAY
MERRILLVILLE, IN 46410

BOONVILLE WARRICK COUNTY PUBLIC LIBRARY
611 W MAIN ST
BOONVILLE, IN 47601

CAPITAL ONE
ATTN: BANKRUPTCY DEPT.
PO BOX 54529
OKLAHOMA CITY, OK 73154-4529

CASH PRO
101 PLAZA EAST BLVD STE 100
EVANSVILLE, IN 47715

CHARLES A. SPAETTI
5011 WASHINGTON AVE SUITE 103
EVANSVILLE, IN 47715

CHRIS BATES
19 E OREGON ST
EVANSVILLE, IN 47710

CITIFINANCIAL
PO BOX 6043
SIOUX FALLS, SD 57104

CLARK BRAUN
6177 PFAFFLIN LAKE BLVD
NEWBURGH, IN 47630

CLIENT SERVICES
3451 HARRY S TRUMAN BLVD
ST CHARLES, MO 63301-4047

CNAC
DBA JD BYRIDER
2116 FIRST AVE
EVANSVILLE, IN 47710

CNAC FINANCE CO.
7400 N SHADELAND AVE STE 200
INDIANAPOLIS, IN 46250

COLLECTION ASSOCIATES
NDBA RECEIVABLES MANAGEMENT PARTNERS
1809 N BROADWAY ST
GREENSBURG, IN 47240-8217

COMPLETE BILLING SERVICES
517 US HWY 31 NORTH
GREENWOOD, IN 46142

CREDIT FIRST NA
PO BOX 81344
CLEVELAND, OH 44181-8026

CREDIT MANAGEMENT
4200 INTERNATIONAL PKWY
CARROLLTON, TX 75007

DEACONESS ANESTHESIA
600 MARY ST
EVANSVILLE, IN 47711

DEACONESS EMERGENCY PHYSICIANS
PO BOX 3407
EVANSVILLE, IN 47733-3407

DEACONESS GATEWAY HOSPITAL
4011 GATEWAY BLVD
NEWBURGH, IN 47630

DEACONESS GATEWAY HOSPITAL ER PHYS
4011 GATEWAY BLVD
NEWBURGH, IN 47630

DEACONESS HEALTH SYSTEM
PO BOX 1230
EVANSVILLE, IN 47706-1230

DEACONESS HOSPITAL
PO BOX 152
EVANSVILLE, IN 47701-0152

DEACONESS HOSPITAL INC
600 MARY STREET
EVANSVILLE, IN 47747

DEACONESS SINGLE BILLING
DEACONESS SINGLE BILLING (EPIC)
PO BOX 1230
EVANSVILLE, IN 47706

DEBBIE & HAROLD BEUMEL
5673 RIVERWALK CIR
NEWBURGH, IN 47630

DENNIS J BECK MD
533 W COLUMBIA ST
C/O ORTHOPAEDIC ASSOCIATES
EVANSVILLE, IN 47710

DIANNE & BOBBY KING
313 N ENGLEWOOD
EVANSVILLE, IN 47711

DODSON & SCHAEFER
PO BOX 2059
EVANSVILLE, IN 47714

DOYLE & JUNE KIFER
4200 WYNTREE DR
NEWBURGH, IN 47630

EPI FINANCE GROUP, LLC
517 US HIGHWAY 31 N
GREENWOOD, IN 46142-3932

ERICK R ROBERTSON
1826 S BOSSE
EVANSVILLE, IN 47712

ETHELYN RHEINHARDT
CREDITOR DECEASED

EVANSVILLE RADIOLOGY PC
350 W COLUMBIA ST STE 420
EVANSVILLE, IN 47710

EVANSVILLE WATER & SEWER UTILTIY
1 NW MARTIN LUTHER KING BLVD ROOM 104
EVANSVILLE, IN 47708

GLOBAL RECEIVABLES SOLUTIONS, INC.
2703 N HWY 75
SHERMAN, TX 75090

HARLEY DAVIDSON FINANCIAL
PO BOX 21829
CARSON CITY, NV 89721

HOOSIER ACCOUNTS SERVICE
PO BOX 4007
EVANSVILLE, IN 47724-0007

INDIANA HOUSING AND COMMUNITY
30 S MERIDIAN ST
INDIANAPOLIS, IN 46204

KAHN, DEES, DONOVAN & KAHN
PO BOX 3646
EVANSVILLE, IN 47735-3646

KEYMED DATA SERVICES
PO BOX 102607
ATLANTA, GA 30368

LEE WEDDING-COOPER
1901 PLANTATION CT APT B
EVANSVILLE, IN 47714

LYNNVILLE PARK & RECREATION
207 S MAIN ST
LYNNVILLE, IN 47619

MARY LOU WELCH (WEIL)
3699 BETHANY CHURCH RD
BOONVILLE, IN 47601

MED 1 SOLUTIONS
517 US HWY 31 N
GREENWOOD, IN 46142

MEDICAL & PROFESSIONAL COLLECTION SVC.
5055 NEWBURGH PLAZA SOUTH
NEWBURGH, IN 47630

MIDWEST NEUROLOGICAL PC
PO BOX 5349
EVANSVILLE, IN 47716-5349

NATIONAL RECOVERY AGENCY
2491 PAXTON ST
HARRISBURG, PA 17111

NORMAN H HEBBER (DECEASED)
C/O CHARLES A. SPAETTI
5011 WASHINGTON AVE SUITE 103
EVANSVILLE, IN 47715

ONEMAIN FINANCIAL
600 EAST DIAMOND AVE
EVANSVILLE, IN 47711

ORTHOPAEDIC ASSOCIATES
515 READ STREET
EVANSVILLE, IN 47710

ORTHOPAEDIC ASSOCIATES EVANSVILLE
PATIENT BILL PROCESSING CENTER
PO BOX 102594
ATLANTA, GA 30368

REPUBLIC BANK
C/O EPI FINANCE GROUP
517 US HIGHWAY 31 NORTH
GREENWOOD, IN 46142

REV 1 SOLUTIONS
517 US HWY 31 N
GREENWOOD, IN 46142

RICHARD M REINHARDT
3114 S WEINBACH
EVANSVILLE, IN 47714

ROCKERS CHIROPRACTIC
2836 MT. VERNON AVE
EVANSVILLE, IN 47712

RONALD K REINHARDT
3114 S WEINBACH
EVANSVILLE, IN 47714

SEARS CREDIT CARD SERVICES
PO BOX 6286
SIOUX FALLS, SD 57104

SHANNON S FISHER
718 MAXWELL AVE
EVANSVILLE, IN 47711

SOURCE RECEIVABLES MANAGEMENT
4615 DUNDAS DR STE 102
GREENSBORO, NC 27407

SOUTHERN INDIANA IMAGING CONSULTANTS
PO BOX 138
EVANSVILLE, IN 47701-0138

SPRINGLEAF FINANCE MANAGEMENT CORP.
FDBA AMERICAN GENERAL FINANCE
PO BOX 3212
EVANSVILLE, IN 47731

ST. MARY'S
7109 RELIABLE PARKWAY
CHICAGO, IL 60686

ST. MARY'S CONVENIENT CARE &
OCCUPATIONAL MEDICINE
2330 LYNCH RD
EVANSVILLE, IN 47711

ST. MARY'S MEDICAL CENTER
3700 WASHINGTON AVE
EVANSVILLE, IN 47714

STELLAR RECOVERY
4500 SALISBURY ROAD SUITE 10
JACKSONVILLE, FL 32216

TIME WARNER CABLE
104 SOUTH WOODBURN DR
DOTHAN, AL 36305

TIME WARNER CABLE SWO DIVISION
PO BOX 1060
CAROL STREAM, IL 60132-1060

UNTERBERG & ASSOCIATES, PC
8050 CLEVELAND PLACE
MERRILLVILLE, IN 46410

VECTREN ENERGY DELIVERY
ATTN SHARON ARMSTRONG
PO BOX 209
EVANSVILLE, IN 47702

WALT & LYNN LOWE
1009 S BURKHARDT RD
EVANSVILLE, IN 47715

WELBORN CLINIC
421 CHESTNUT ST
EVANSVILLE, IN 47708

WELLS FARGO BANK, N.A.
3476 STATEVIEW BLVD
ATTN: BANKRUPTCY DEPARTMENT MAC D3347-01
FORT MILL, SC 29715

WEST ASSET MANAGEMENT
PO BOX 790113
ST LOUIS, MO 63179

WESTERN ALLIANCE BANK
PO BOX 927830
SAN DIEGO, CA 92192

WILLIAM M ROBERTS, MD
4099 GATEWAY BLVD
NEWBURGH, IN 47630

ZIEMER STAYMAN WEITZEL & SHOULDERS
20 NW FIRST STREET 9TH FL
PO BOX 916
EVANSVILLE, IN 47706